

TRANSMITTAL FORM	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;">Application Number</td> <td>10/731,116-Conf. #4657</td> </tr> <tr> <td>Filing Date</td> <td>December 10, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Toshihiko KAKU</td> </tr> <tr> <td>Art Unit</td> <td>2624</td> </tr> <tr> <td>Examiner Name</td> <td>R. I. Chu</td> </tr> <tr> <td>Attorney Docket Number</td> <td>4243-0106P</td> </tr> </table>	Application Number	10/731,116-Conf. #4657	Filing Date	December 10, 2003	First Named Inventor	Toshihiko KAKU	Art Unit	2624	Examiner Name	R. I. Chu	Attorney Docket Number	4243-0106P
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(to be used for all correspondence after initial filing)													
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ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD <div style="border: 1px solid black; padding: 2px; width: fit-content;">Remarks</div>	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Restriction Requirement

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	BIRCH, STEWART, KOLASCH & BIRCH, LLP	
Signature		
Printed name	Marc S. Weiner	
Date	April 7, 2008	Reg. No. 32,181